REPORT CONTROL SYMBOL DEPARTMENT OF DEFENSE SENIOR CONTRACTING OFFICIAL -DD-P&R(Q&A)1841 WAIVER REQUEST COMPONENT/ORGANIZATION 1. TO (Component Acquisition Executive (CAE)) 2. VIA (Director, Acquisition Career Management (DACM)) 3. COPY TO (USD(A)AET&CD) 4. FROM (Organization and Address) **POSITION DATA** 5. POSITION NUMBER | 6. POSITION TITLE 7. GRADE/RANK 8. OCCUPATIONAL SERIES/ SPECIALTY **IDENTIFICATION AND PERSONAL DATA** 9. NAME (Last, First, Middle Initial) 10. GRADE/RANK 11. SSN 12. ACQUISITION CAREER FIELD 13. OCCUPATIONAL SERIES/SPECIALTY 14. WAIVER REQUEST (X one) ABSENCE OF FOUR YEARS' CONTRACTING EXPERIENCE NON-ACQUISITION CORPS MEMBER 15. REQUEST BASED ON DETERMINATION THAT INDIVIDUAL POSSESSES THE FOLLOWING QUALIFICATIONS THAT OBVIATE THE NEED FOR MEETING THE EDUCATION, TRAINING AND EXPERIENCE REQUIREMENTS (Written narrative - use other side if needed) 16. REQUESTING OFFICIAL a. TYPED NAME b. GRADE c. ORGANIZATION d. SIGNATURE e. DATE (YYYYMMDD) 17. COMPONENT APPROVING OFFICIAL a. TYPED NAME b. TITLE c. SIGNATURE d. DATE (YYYYMMDD)